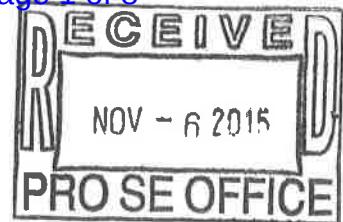


UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORKALECIA N. RUMPH &  
CORDERO J. RUMPH

(In the space above enter the full name(s) of the plaintiff(s).)



## COMPLAINT

-against-

THE CITY OF NEW YORK AND NEW  
YORK CITY POLICE DEPARTMENT-  
NYPD 47 PCT, P.O. JUAN  
RODRIGUEZ, DETECTIVE TAZ  
& DETECTIVE WILLIAMS & ETC 47<sup>TH</sup> PCT

Jury Trial:  Yes  No  
(check one)

15CV 8749

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

## I. Parties in this complaint:

A. List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name ALECIA N. RUMPH & CORDERO J. RUMPH  
 Street Address \_\_\_\_\_  
 County, City \_\_\_\_\_  
 State & Zip Code \_\_\_\_\_  
 Telephone Number \_\_\_\_\_

B. List all defendants. You should state the full name of the defendant, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name P.O. JUAN RODRIGUEZ - SHIELD #016076  
 Street Address 4111 LACONIA AVENUE

County, City BRONX, NEW YORK  
 State & Zip Code N.Y 10466  
 Telephone Number 718-920-1211

Defendant No. 2 Name DETECTIVE TAZ  
 Street Address 4111 LA CONIA AVENUE  
 County, City BRONX, NEW YORK  
 State & Zip Code N.Y 10466  
 Telephone Number 718-920-1211

Defendant No. 3 Name DETECTIVE WILLIAMS  
 Street Address 4111 LA CONIA AVENUE  
 County, City BRONX, NEW YORK  
 State & Zip Code N.Y 10466  
 Telephone Number 718-920-1211

Defendant No. 4 Name OFFICER(S) POLICE OFFICIAL OF 47<sup>TH</sup> PCT  
 Street Address 4111 LA CONIA AVENUE  
 County, City BRONX, NEW YORK  
 State & Zip Code N.Y 10466  
 Telephone Number 718-920-1211

SEE ATTACHED ADDITIONAL DEFENDANT.

## II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. Only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case.

A. What is the basis for federal court jurisdiction? (check all that apply)

Federal Questions

Diversity of Citizenship

B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue? 4<sup>TH</sup> AMENDMENT CLAIM UNDER THE UNITED STATES CONSTITUTION, 14<sup>TH</sup> AMENDMENT CLAIM UNDER THE UNITED STATES CONSTITUTION, INTENTIONAL OR TENTIONAL TORT CLAIM UNDER THE UNITED STATES CONSTITUTION, CIVIL RIGHTS VIOLATIONS CLAIM

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship \_\_\_\_\_

Defendant(s) state(s) of citizenship \_\_\_\_\_

## III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events.

ADDITIONAL DEFENDANTS

DEFENDANT NO. 5 THE CITY OF NEW YORK.

DEFENDANT NO. 6. NEW YORK CITY POLICE  
DEPARTMENT NYPD.

DEFENDANT NO. 7 47 PRECINCT  
4111 LACONIA AVENUE  
BRONX, NEW YORK N.Y 10466

You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur? 4042 WILDER AVENUE  
APT 1, BRONX, NEW YORK N.Y 10466

B. What date and approximate time did the events giving rise to your claim(s) occur? NOVEMBER 8, 2012 AT APPROXIMATELY 1:45 PM

C. Facts: HOME WAS RAIDED BY VANDALISM BY THE SWAT TEAM (47TH PRECINCT). WE, ALECIA N. RUMPH & CORDERO RUMPH WAS FALSELY ARRESTED / FALSE IMPRISONMENT FOR TWO AND A HALF WEEKS BEFORE CHARGES WAS DROPPED AND OUR CASE WAS DISMISSED.

Who did what?

P.D JUAN RODRIGUEZ OF 47 PCT, SHIELD #D16076, DET. TAZ, DETECTIVE WILLIAMS AND SEVERAL UNIDENTIFIED LAW OFFICIAL OF THE 47TH PRECINCT FALSELY ARRESTED US, ALECIA N. RUMPH & CORDERO RUMPH. WE WERE ALSO MENACE, HARASS AND INTIMIDATED BY THE OFFICIAL AT THE 47TH PRECINCT.

Was anyone else involved?

WE, ALECIA N. RUMPH & CORDERO J. RUMPH WAS THE ONLY ONES WHO SUFFERED THE DREADFUL HUMILIATION & FALSELY ARRESTED BY THE OFFICIAL (SWAT TEAM) AND ETC OF THE 47TH PRECINCT.

Who else saw what happened?

MRS. VINCENT THOMAS (LANDLORD) MR. WILLIAM ASKEN (NEIGHBOR) AND SEVERAL UNKNOWN NEIGHBORS.

#### IV. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. DUE TO THE INCIDENT THAT OCCURRED ON NOVEMBER 8, 2013 AT APPROXIMATELY 1:45 PM CAUSED IT, ALECIA N. RUMPH AND MY BROTHER, CORDERO J. RUMPH POST TRAUMATIC STRESS DISORDER. WE SUFFER FROM ANXIETY ATTACKS / PANIC ATTACKS, NIGHT MARES, STRESS DISORDER, FEAR AND MENTAL ANGUISH, WE SUFFER FROM POST TRAUMATIC STRESS DISORDER.

V. Relief:

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation. WE, ALECIA N. RUMPH AND

CORDERO J. RUMPH ARE ASKING THE COURT TO GRANT US MONETARY COMPENSATION FOR OUR PAIN & SUFFERING, PROPERTY DAMAGES, BUSINESS MONETARY LOSS, FALSELY ARRESTED (INCARCERATION) AND INJURIES SUFFERED BY THE CITY OF NEW YORK, AND NEW YORK CITY POLICE DEPARTMENT- NYPD & 47TH PRECINCT, PO JUAN RODRIGUEZ OF 47 PCT, SHIELD #016076, DET. TAZ AND DETECTIVE WILLIAMS AND SEVERAL UNIDENTIFIED LAW OFFICIALS OF THE 47TH PCT.

1. PROPERTY DAMAGES \$20,000 ALECIA N. RUMPH
2. BUSINESS MONETARY LOSS \$30,000 ALECIA RUMPH & CORDERO RUMPH
3. FALSELY ARRESTED (INCARCERATION) 2 1/2 WEEKS  
VICTIM: ALECIA N. RUMPH = \$500,000 VICTIM 2 CORDERO RUMPH \$500,000 SEEKING EACH FOR FALSELY ARRESTED / INCARCERATION

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 5<sup>th</sup> day of NOVEMBER, 2015

C.R.

Alecia Rumph

Signature of Plaintiff

Mailing Address

[REDACTED]

Telephone Number

Fax Number (if you have one)

NONE

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint. Prisoners must also provide their inmate numbers, present place of confinement, and address.

For Prisoners:

I declare under penalty of perjury that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, I am delivering this complaint to prison authorities to be mailed to the Pro Se Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

Inmate Number

[REDACTED]

V. RELIEF :

INJURIES CLAIMED: PAIN AND SUFFERING

VICTIM 1 - ALECIA N. RUMPH

EMOTIONAL, MENTALLY AND PHYSICALLY  
DISTRESS (STRESS)

POST TRAUMATIC STRESS DISORDER, ANXIETY

PANIC ATTACKS SUFFERED FROM INCIDENT.

TOTAL AMOUNT OF MONETARY COMPENSATION

SEEKING \$500,000 DOLLARS.

VICTIM 2 - CORDERO J. RUMPH

EMOTIONAL, MENTALLY AND PHYSICALLY  
DISTRESS (STRESS)

POST TRAUMATIC STRESS DISORDER,

ANXIETY, PANIC ATTACKS SUFFERED FROM

INCIDENT ON NOVEMBER 8, 2012.

TOTAL OF AMOUNT OF MONETARY COMPENSAT-

ION SEEKING IS \$500,000 DOLLARS.

CRIMINAL COURT OF THE CITY OF NEW YORK  
COUNTY OF BRONX

THE PEOPLE OF THE STATE OF NEW YORK  
VS

RUMPH, ALECIA  
Defendant

Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Docket Number: 2012BX064195

220.16 220.06 220.03  
Arraignment Charges

CERTIFICATE OF DISPOSITION  
NUMBER: 143872

Date of Birth

NYSID Number

11/08/2012  
Date of Arrest/Issue

Summons No:

Case Disposition Information:

Date Court Action  
01/30/2013 DISMISSED AND SEALED

Judge  
ADLER, H

Part  
FA

**DISMISSED  
& SEALED**

NO FEE CERTIFICATION

GOVERNMENT AGENCY COUNSEL ASSIGNED

NO RECORD OF ATTORNEY READILY AVAILABLE. DEFENDANT STATES COUNSEL WAS ASSIGNED

SOURCE ACCUSATORY INSTRUMENT DOCKET BOOK/CRIMS CRC3030 [CRS963]

I HEREBY CERTIFY THAT THIS IS A TRUE EXCERPT OF THE RECORD ON FILE IN  
THIS COURT

TURNBULL, V  
COURT OFFICIAL SIGNATURE AND SEAL

10/07/2015  
DATE

FEE: NONE

(CAUTION: THIS DOCUMENT IS NOT OFFICIAL UNLESS EMBOSSED WITH THE COURT  
SEAL OVER THE SIGNATURE OF THE COURT OFFICIAL.)

CRIMINAL COURT OF THE CITY OF NEW YORK  
COUNTY OF BRONX

THE PEOPLE OF THE STATE OF NEW YORK  
VS

RUMPH, CORDERO  
Defendant

Address

City State Zip

Docket Number: 2012BX064196

220.16 220.06 220.03  
Arraignment Charges

CERTIFICATE OF DISPOSITION  
NUMBER: 134152

Date of Birth

NYSID Number

11/08/2012  
Date of Arrest/Issue

Summons No:

Case Disposition Information:

Date Court Action  
01/30/2013 DISMISSED AND SEALED

Judge  
ADLER, H

Part  
FA

**DISMISSED**

**SEALED**

pursuant to Section 160.50 of the CPL

I HEREBY CERTIFY THAT THIS IS A TRUE EXCERPT OF THE RECORD ON FILE IN  
THIS COURT.

RICHARDSON, K  
COURT OFFICIAL SIGNATURE AND SEAL

10/14/2015  
DATE  
FEE: 10.00

(CAUTION: THIS DOCUMENT IS NOT OFFICIAL UNLESS EMBOSSED WITH THE COURT  
SEAL OVER THE SIGNATURE OF THE COURT OFFICIAL.)